

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. UV-56

Examiner Reuben M. Brown
Group Art Unit 2611



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AUG 05 2003

Technology Center 2600

EXPRESS MAIL CERTIFICATION

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Date of Deposit August 1, 2003

I hereby certify that this transmittal letter and the other papers and fees identified in this transmittal letter as being transmitted herewith are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and are addressed: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Lillian Garcia

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR CONTINUED EXAMINATION

Sir:

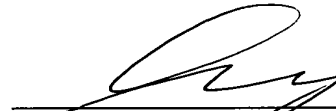
This is a request for continued examination under 37 C.F.R. § 1.114, of pending prior Application No. 09/330,792, Confirmation No. 9835, filed on June 11, 1999 of Edward B. Knudson et al. for Series Reminder and Series Recording from an Interactive Television Program Guide.

1. ☐ Please enter the Amendment Pursuant to 37 C.F.R. § 1.116 filed on _____ in Application No. _____.
2. ☐ Please consider the arguments in the Appeal Brief or Reply Brief filed on _____ in Application No. _____.
3. ☒ An Amendment/Reply is enclosed.
4. ☐ Affidavit(s)/Declaration(s) is/are enclosed.
5. ☐ An Information Disclosure Statement is enclosed.
6. ☐ A suspension of action on the above-identified patent application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months.
7. ☒ A check in the amount of \$750.00 in payment of the fee under 37 C.F.R. § 1.17(e) is enclosed.

8. ☐ Please charge \$750.00 to Deposit Account No. 06-1075 in payment of the fee under 37 C.F.R. § 1.17(e). A duplicate copy of this Request is enclosed.
9. ☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17(e) in connection with this Request, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this Request is enclosed.
10. ☒ Please grant a ☒ one-month, ☐ two-month, ☐ three-month, ☐ four-month, extension of time under 37 C.F.R. § 1.136(a) to the Examiner's Action of April 10, 2003 in the above-identified patent application.
11. ☒ A check in the amount of \$110.00 in payment of the extension-of-time fee is enclosed.
12. ☐ The Director is hereby authorized to charge payment of any additional extension-of-time fees required under 37 C.F.R. § 1.17 in connection with this paper, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this Request is enclosed.
13. ☐ Please charge the extension-of-time fee of \$ _____ to Deposit Account No. 06-1075. A duplicate copy of this Request is enclosed.

8/1/2003

(Date)



Angeline J. Huang
Agent for Applicants
(Limited Recognition)
☒ Filed under § 1.34(a)

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09/330,792

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	254 minus 20 =	*
INDEPENDENT CLAIMS	8 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR

OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

OR

OR

OR

OR

OR

RATE	FEE
BASIC FEE	740.00
X\$18=	
X84=	
+280=	
TOTAL	150.00

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 247	Minus	** 254	=
	Independent	* 7	Minus	*** 8	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	0

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 286	Minus	** 254	= 32
	Independent	* 8	Minus	*** 8	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X\$18=	576.00
X84=	86.00
+280=	320.00
TOTAL ADDIT. FEE	576.00

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.